## City of Hermosa Beach

1315 Valley Drive, Hermosa Beach, CA 90254 310.318-0203 - Fax 310.372-6186

Email: recordsrequest@hermosabch.org

Received By:_	CC		
Referred To:	Committees,		
Date Referred:	7-10-18		

## **Public Records Request**

The City of Hermosa Beach encourages public participation in the governing process and provides reasonable accessibility to all public records except those documents which are exempt from disclosure by express provisions of law or considered confidential or privileged under the law. The City is under no obligation to respond to requests which are not focused or specific. The City may withhold documents which are exempt from disclosure under state or federal law, including the attorney—client privilege or any other applicable privilege. The City, in accordance with Government Code Section 6253(b), has ten (10) days to respond to any request for public documents by indicating whether or not the documents exist and will be made available. Actual production of the documents may take somewhat longer depending upon their ease of availability and staff workload. To assist us in providing a timely response to your request, please fill out the form below and indicate the specific record/document you wish to review.

Name (please print):		Email:	
Donny Young		beachtennisassociation@gmail.com	
Address:			Phone:
1600 Ardmore Ave #412			310-753-2834
City:			Fax:
Hermosa Beach, CA 90254			
Record or Document Request			
			ument separately. Please be as specific as
•	•	•	prove to be burdensome and therefore the
City may not be able to respond	I. (Additional sheets may be	used) Submit all	requests to the City Clerk's Office.
We are requesting the name or ema	ail of the person who complained at	oout our beach tennis so	ocial and said we were charging people.
It was sent to Kelly Orta on June 20,20	18. We inquired from Kelly and she	e said we need to go thr	rough this process
Thank you!!			
Photocopies are \$0.20 per page	e (Mailing fee, if applicable	is \$3.00 plus posta	age). Fees must be paid before records are
released.			
I agree to pay all applicable fe	es and charges per the Cit	y Council Resoluti	ion of Fees for any copies I request of the
above mentioned document. Ac	ccepted method of payment:	Cash or check. C	Credit card accepted in person only.
-			
1 TAD	7-10-2018		
- There			
Signature	Date		
For Departmental Use Only:			
Action Requested:	Action Taken:	Ву	Date
Review Only	Document Reviewed		Non-Existent Document
Copies Requested	Copies Provided		_Other (Please Explain)
	Refusal/Reason		
For City Clerk's Use Only:			
THE SHEET SHEET A LINE SHIP.	-		